

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

PRIOR NOTICE AND PARENT CONSENT

Student Name _____ Date ____/____/____ Page ____ of ____

Student ID Number _____

PRIOR NOTICE

The school division proposes to implement this IEP. This proposed IEP will allow the student to receive a free appropriate public education in the least restrictive environment. This decision is based upon a review of current records, current assessments and the student's performance as documented in the Present Level of Academic Achievement and Functional Performance. Other options considered, if any, and the reason(s) for rejection are attached, or can be found in the Placement Decision section of this IEP. Additionally, other factors, if any that are relevant to this proposal are attached. Parent and adult student rights are explained in the Procedural Safeguards. If you, the parent(s) and adult student, need another copy of the Procedural Safeguards or need assistance in understanding this information please contact

_____ at (____) _____ or e-mail _____ or
_____ at (____) _____ or e-mail _____ .

____ Parent(s) initials here indicate that the parent(s) has read the above prior notice and attachments, if any, before giving permission to implement this IEP.

PARENT/ADULT STUDENT CONSENT: Indicate your response by checking the appropriate space and sign below.

____ I give permission to implement this IEP.

____ I do not give permission to implement this IEP.

Parent Signature _____ / ____ / ____
Date